

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		2				
9		1				
10		2				
11		2				
12		2				
13		2				
14		2				
15		1				
16		1				
17		2				
18		2				
19		2				
20		1				
21		1				
22		1				
23		1				
24		1				
25		1				
26		1				
27		1				
28		1				
29		1				
30		2				
31		1				
32		1				
33		2				
34		2				
35		2				
36		2				
37		1				
38		1				
39	1					
40		1				
41		1				
42		1				
43		1				
44		2				
45		1				
46		1				
47		1				
48		2				
49		2				
50		2				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		2				
52		2				
53		2				
54		1				
55		1				
56		1				
57						
58						
59						
60						
61						
62						
63						
64						
65						
66						
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68						
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83						
84						
85						
86						
87						
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89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

CLAIMS ONLY

SERIAL NO.

09927122

FILING DATE

08-10-01

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			★		★		★	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51		2				
2		1					52		2				
3		1					53		2				
4		1					54		1				
5		1					55		1				
6		1					56		1				
7		1					57						
8		2					58						
9		1					59						
10		2					60						
11		2					61						
12		2					62						
13		2					63						
14		2					64						
15		1	20				65						
16		1					66						
17		2					67						
18		2					68						
19		2					69						
20		1					70						
21		1					71						
22		1					72						
23		1					73						
24		1					74						
25		1					75						
26		1					76						
27		1					77						
28		1					78						
29		1					79						
30		2					80						
31		1					81						
32		1					82						
33		1					83						
34		2					84						
35		2					85						
36		2					86						
37		1					87						
38		1					88						
39	1						89						
40		1					90						
41		1					91						
42		1					92						
43		2					93						
44		2					94						
45		1					95						
46		1					96						
47		1					97						
48		2					98						
49		2					99						
50		2					100						
TOTAL IND.	2						TOTAL IND.						
TOTAL DEP.	75						TOTAL DEP.						
TOTAL CLAIMS	77						TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS